PS Form 3811, February 2004	Domestic Return Receipt			1	102595-02-M-1540	
Article Number (Transfer from service label)	7002 0	18FO 0000	1409 L	4980		_
• •		4. Restricted Delive	ery? (Extra Fe	e)	☐ Yes	_
A Committee of the Comm		☐ Insured Mail	□ C.O.D			
		Certified Mail Registered	-		or Merchandise	,
Greenup, KY 41144	٦	3. Service Type				Ī
275 Mill Branch	· [L					_
C.O. Wells						Ì
1. Article Addressed to:		If YES, enter del			No	
Attach this card to the back of the ror on the front if space permits.		B. Received by (A) D. Is delivery address	3.1350M	2	ate of Delivery - フ - O フ Ves	_
 Print your name and address on the so that we can return the card to yo 	reverse	X Deyy	w.	/\\ 	☐ Addressee	
Complete items 1, 2, and 3. Also contem 4 if Restricted Delivery is desired.	omplete	A. Signature		MA	☐ Agent	1
SENDER: COMPLETE THIS SECTION	₹B Docur	COMPLETE THIS	SEC HOLEGA	02/05/	2007 l	Pa